

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2011 JAN 26 AM 10:19

COMMITTEE NAME (Must be same as on Statement of Organization)
Yes North Linn Can

IMPORTANT: Indicate by # type of committee you are reporting for:
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:
Candidate Name _____ Political Party (if applicable) _____
Office Sought _____ District (if Senate or House) _____

FORM DR-2
(Rev. 12/2008) **DISCLOSURE REPORT**

For Office Use Only
Comm. # 21606
Logged In SD
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

David J. Miller
SIGNATURE OF PERSON FILING REPORT

515-448-4484
TELEPHONE

1-24-2011
DATE SIGNED

I AM FILING A Jan 19th REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED Jan 19th

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
Feb 1, 2011
County & Local Committees, enter County in which Election is held
Linn

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) \$ 850

Schedule F: Loans Received total (Attach Schedule F) \$ -0-

Schedule H: Total Sales of Campaign Property (Attach Schedule H) \$ -0-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 850

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) \$ 54

Schedule F: Loan Repayments total (Attach Schedule F) \$ 796

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 796

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 438.45

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 35.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ -0-

CONSULTANT BREAKDOWN (Schedule G Attached?) YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ -0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

Rear Form

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Yes North Linn Can

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12-22-2010	ID# cash CK#	David Miller 3222 Overland Ave Walker, Ia 52352		\$ 50	<input type="checkbox"/>
12-22-2010	ID# CK#	Jim Haughenbury 1598 Hutchinson Rd Coggon, Ia 52218		100	<input type="checkbox"/>
12-27-2010	ID# CK#	Bud Miller 2459 330th street Walker, Ia 52352		40	<input type="checkbox"/>
12-27-2010	ID# CK#	Luke Haughenbury 1570 Hutchinson Rd Coggon, Ia 52218		130	<input type="checkbox"/>
12-27-2010	ID# CK#	Sheri Miller 3222 Overland Ave Walker, Ia 52352		30	<input type="checkbox"/>
12-29-2010	ID# CK# ✓	Travis Ries 5623 Henderson Ct. Coggon, Ia 52218		50	<input type="checkbox"/>
12-29-2010	ID# CK# ✓	Kurt, Robert & Angie 520 E. Linn Street Coggon, Ia 52218		100	<input type="checkbox"/>
12-29-2010	ID# CK# ✓	Bowen, Tony & Jennifer 588 6th Avenue Coggon, Ia 52218		100	<input type="checkbox"/>
12-29-2010	ID# CK# ✓	Kathy Fisher 3015 Washington Ave Coggon, Ia 52218		100	<input type="checkbox"/>
12-29-2010	ID# CK# ✓	Anne Boss 923 Upper Boulder Rd Central City, Ia 52214		50	<input type="checkbox"/>

SUB-TOTAL

\$ 750

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Report Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☒ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Yes North Linn Can

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12-30-2010	ID# CK# ✓	Zumbach, Louis & Deb 558 Monticello Rd Coggon, Ia 52218		\$ 100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 100

TOTAL (if last page of this schedule)

\$ 850

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Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Yes North Linn Can

Jan 19 Report

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-26-2010	ID# CK# 1001	Michael A Mauro Lucas Building 13 th Floor Des Moines, Ia 50319	List of voters in North Linn District	\$ 10
12-27-2010	ID# CK# 1002	U.S. Postal Service Walker, Ia 52252	1 Roll of Stamps (100) For Mailings	44
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 54
TOTAL (If last page of this schedule)				\$ 54

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Yes North Linn Can

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Report Form

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
12-25-2010	Timberland Promotions Inc 1905 N Center Pt. Rd P.O. Box 220 Hialetha, Ia 52233	100 colored plastic yard signs	\$ 438 ⁴⁵
SUB-TOTAL			\$ 438 ⁴⁵
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 438 ⁴⁵

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Yes North Linn Can

Reset Form

SCHEDULE

E

(Rev. 08/97)

IN-KIND
CONTRIBUTIONS☒ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
12-17-2010	Grant Westemier 37 Prairie Dr. Walker, Ia. 52352		100 Flyers capitol at approx \$25 per copy	\$ 25	<input type="checkbox"/>
12-19-2010	Kay Johnson 50 prairie Drive Walker, Ia. 52352		Set up website for committee	10	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 35

TOTAL (If last

page of this

schedule)

\$ 35

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Page 1 of 2
(for Schedule E)